

TRAVEL EXPENSE CLAIM

CHP 262 (Rev. 3-93) OPI 071

☐ Relocation ☐ Out of State

DEPARTMENT
BTH Agency

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CLAIMANT'S NAME Dale E. Bonner	I. D. NUMBER [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	WORK TELEPHONE NUMBER (916) 323-5401
POSITION Secretary	CB / ID NUMBER E99	DIVISION OR BUREAU Business, Transportation & Housing Agency	LOCATION CODE 699
RESIDENCE ADDRESS [REDACTED]		HEADQUARTERS ADDRESS 980 9th Street, Suite 2450	
CITY, STATE, AND ZIP CODE [REDACTED]		CITY, STATE, AND ZIP CODE Sacramento, CA 95814	

1. MONTH / YEAR		3. LOCATIONS WHERE EXPENSES WERE INCURRED	4. LODGING	5. MEALS			6. INCIDENTALS	7. TRANSPORTATION				8. BUSINESS EXPENSE	9. TOTAL EXPENSES FOR DAY
2. DATE	TIME			BREAKFAST	LUNCH	O.T., LT, N/C, RELO. OR DINNER		A. COST OF TRANS.	B. TYPE USED	C. TOLLS, PARKING	D. PRIVATE CAR USE MILES AMOUNT		
May/2010													
13	1400	Sacramento to Los Angeles											
14		Oceanside			10.00								10.00
17	1600	Los Angeles to Sacramento											
20	1800	Sacramento to Los Angeles						40.00	cab				40.00
22		Los Angeles											
24		Los Angeles								20.00			20.00
25		Los Angeles		6.00									6.00
27		Santa Barbara		6.00									6.00
June 1	1100	Los Angeles to Sacramento											
10. CLAIM TOTAL				12.00	10.00			40.00		20.00			82.00

11. PURPOSE OF TRIP, REMARKS AND DETAILS (ATTACH RECEIPTS / VOUCHERS WHEN REQUIRED)
 May 14 - Attend funeral for fallen CHP officer. May 17 - meeting with Southern CA Association of Governments. May 22 - Present award at AMGEN Tour of California. May 24 - San Francisco Transportation Authority meeting / prep for Public Infrastructure Financing Forum (PIFF). May 25 - Public Infrastructure Advisory Committee / PIFF meeting. May 27 - Speak at Lusk 100 Annual Retreat. June 1 - return to Sacramento.

12. NORMAL WORK HOURS
 13. REGULAR DAYS OFF
 14. PRIVATE VEHICLE LICENSE NUMBER
 15. MILEAGE RATE CLAIMED

ACCOUNTING USE ONLY

PAID FOR BY REVOLVING CHECK NUMBER

16. I HEREBY CERTIFY that the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately-owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by S.A.M. Sections 0750, 0751, 0752, 0753, and 0754 pertaining to vehicle safety and seat belt usage.

CLAIMANT'S SIGNATURE (blue ink only) [REDACTED]	DATE 6-16-10	SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT [REDACTED]	DATE 6/17/10
SIGNATURE AND TITLE OF AUTHORITY FOR SPECIAL EXPENSES		ADMINISTRATIVE SERVICES OFFICER	